

[COMMITTEE PRINT]

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Calendar No. 000

113TH CONGRESS } 2nd Session }	SENATE	{ REPORT 113-00
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DEPARTMENTS OF LABOR, HEALTH AND HUMAN SERVICES, AND EDUCATION, AND RELATED AGENCIES APPROPRIATION BILL, 2015

JUNE 00, 2014.—Ordered to be printed

Mr. HARKIN, from the Committee on Appropriations, submitted the following

REPORT

[To accompany S. 0000]

The Committee on Appropriations reports the bill (S. 0000) making appropriations for Departments of Labor, Health and Human Services, and Education, and related agencies for the fiscal year ending September 30, 2015, and for other purposes, reports favorably thereon and recommends that the bill do pass.

Amounts to new budget authority

Total of bill as reported to the Senate	\$848,378,218
Amount of 2014 appropriations	802,052,910
Amount of 2015 budget estimate	845,769,028
Bill as recommended to Senate compared to:	
2014 appropriations	+ 46,325,308
2015 budget estimate	+ 2,609,190

NCI to address this gap. Finally, the Committee directs NIH to submit a report no later than 60 days after enactment of this act on pediatric brain cancer. The report should include: the state of science; current NIH funded research initiatives; and key research questions that need to be prioritized.

Psycho-Social Distress Complications.—According to the Institute of Medicine, nearly 50 percent of all cancer patients experience distress. Further, studies suggest that distress in cancer patients leads to higher annual healthcare costs, less compliance with treatment pathways and poorer health outcomes. While significant advancements have been made in biomedical treatments in cancer care, the Committee is concerned that the unaddressed psycho-social needs of patients are adversely impacting the effectiveness and cost of care, as well as the individuals' overall well-being. The Committee is encouraged that the American College of Surgeons Commission on Cancer's new patient centered standards will require institutions to screen patients for distress. The Committee urges NCI to implement this requirement in the NIH Clinical Center and in all NCI-funded clinical trials.

Slow-Growing Children's Brain Tumors.—The Committee is encouraged by NIH's progress in better understanding the pathways that are active in Pediatric Low Grade Astrocytoma [PLGA] and pleased that NCI launched the first clinical trial for a targeted agent directed at genomic characteristics common in PLGA. The Committee is eager for these discoveries to be translated into effective therapies for PLGA patients. The Committee encourages NCI to continue its work on PLGA through the Specialized Programs of Research Excellence focusing on brain cancer, and to prioritize PLGA through the Cancer Therapy Evaluation Program.